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COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES
313 N. Figueroa, Los Angeles, CA 90012
(213) 240-8101

January 21, 2003

TO: Each Supervisor

FROM: Thomas L. Garthwaite, MD
Director and Chief Medical Officer

**SUBJECT: ACCREDITATION OF TRAINING INSTITUTION
KING/DREW MEDICAL CENTER**

On December 10, 2002, your Board approved a motion instructing the Department of Health Services to work with Charles R. Drew University of Medicine and Science (Drew University) to develop and report back on a plan of correction related to deficiencies cited by the Accreditation Council on Graduate Medical Education (ACGME), with regard to the County's resident physician training programs at King/Drew Medical Center (KDMC). On January 7, 2003, I reported to the Board on the accreditation status of at risk resident training programs. Those programs include anesthesiology, internal medicine, neonatology/perinatal medicine, radiology and general surgery. As reported, also of concern is the overall institutional accreditation status, which is necessary to allow continuation of the individual residency programs. King/Drew Medical Center received an Unfavorable[®] accreditation from the ACGME regarding its institutional commitment in November 2000. In April 2003, ACGME site inspectors will conduct an Institutional Review[®] to assess institutional commitment and corrective action as taken by KDMC and Drew University.

Plan of Correction and Supporting Events

The attached report AGraduate Medical Education Plan of Corrective Action[®] summarizes the ACGME AInstitutional Review[®] citations, status of resolution, and corrective actions taken. The time line shows when corrective action and other events occurred.

Progress since last review

As reported, management of the academic training programs is a shared responsibility between the County and Drew University. The diminishment of institutional commitment as perceived by the ACGME occurred in both institutions over a period of time under different leadership. Except for the University President, the executive leadership at KDMC and Drew University has changed since the ACGME Institutional Review® in November 2000 (Dean of Drew, CEO at KDMC, Medical Director at KDMC, Associate Dean for Graduate Medical Education, Director of Health Services for County). The new leadership is clear about the role residency training plays in the County's Southwest Cluster, and recognizes the KDMC/Drew affiliation as a significant resource and pipeline for the development of minority physicians on the West Coast. Further, while we continue to review which specific residency programs we will have at which Department of Health Services facility, I have firmly committed that the programs we choose to continue will be fully supported and of high quality. I am meeting regularly with the executive management of KDMC and Drew University to review the progress of the plan of correction and to address the other issues associated with building a strong affiliation. It is my belief that we are making good progress.

TLG:ll

Attachment

c: Chief Administrative Officer
County Counsel
Executive Officer, Board of Supervisors
President, Charles R. Drew University of Medicine and Science

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2003

Shaded areas denote resolved and rescinded citations

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CITATION		CORRECTIVE ACTIONS/EVENTS	2000	2001					2002					2003							
			N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M
5. Lack of resident participation on institutional committees and councils	Status: RESCINDED by ACGME	All committees which pertain to education and patient care have resident representatives- Monitor process via JCIR communications meetings																			
6. Residents do not evaluate faculty on an annual basis, specifically Orthopedic Surgery	Status: RESOLVED No Orthopedic site visit in 2002- No issues related to supervision	FACULTY EDUCATION • Review RRC requirements regarding resident evaluations of faculty • University implemented Professional Development series for Faculty and Residents ACTION • Internal reviews • Resident interviews • Orthopedic Surgery faculty evaluations performed online																			
7. Advice of GMCE is not sought regarding compensation of residents and distribution of resources in support of education	Status: RESOLVED	FACULTY EDUCATION • Review of Resident Union (JCIR) MOU and review of Resident Compensation Policies by GMCE ACTION • Reorganization of GME office resulted in improved relationship with GME and payroll • HR attendance, as needed, at regular meetings with Hospital Admin. and Resident Union (JCIR) • Compensation matters discussed, as needed, at JCIR meetings with Hospital Admin.																			
8. Surgical Residents are working excessive hours	Status: ONGOING	FACULTY POLICY REVIEW • Review of ACGME and DHS policies on resident duty hours • Surgery policy on duty hours revised • Search for staffing services. Proposal to hire off-service research residents to increase service providers																			
9. Residents are performing duties extraneous to their educational programs	A. Phlebectomy services remain inadequate at night	ACTION • Resident reporting tools established • Request hiring authority for 4-6 Phlebectomyists to correct limited services																			

☐ Shaded areas denote resolved and rescinded citations

✱ Digital retrieval system activated in the Trauma Bay and the Emergency Room. Contract signed for expansion April 1998.

Contract signed for expansion April 1998

* MEDQUIST System activated for retrieval of dictated radiology reports February 1999

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